

Almost Home Foundation Canine

P.O. BOX 308
 Elk Grove Village, IL 60009-0308
 (630) 582-3738
www.almosthomefoundation.org

Date _____ Dog's name _____ For FOSTER or ADOPTION

Store Location: _____

Adoption requirements: (1) Be at least 21 years of age, (2) Have the consent of all adults living in the household, (3) Have approval from the residence owner, (4) Have valid ID with current address, (5) Be approved by Almost Home Foundation as a suitable adoptive home, and (6) Have a one-week trial to ensure the fit is satisfactory.

Name(s) _____ Driver's license # _____
 address _____ City _____ State _____ Zip _____

Home phone (____) _____ Work phone (____) _____

Cell phone (____) _____ E-mail address _____

Do you work full or part time? _____ How long have you been employed at your present job? _____

Employer _____ City _____

Do they match donations made to 501C3 non-for-profit Yes No

Residence information (residency requirements will be verified)

Do you RENT or OWN? APARTMENT CONDO TOWNHOUSE SINGLE-FAMILY OTHER _____

How long have you lived at your present address? _____ Any plans to move in the near future? YES NO

What will you do with your animal when you move? _____

Do you have a fenced yard, and if so, what is the height of the fence? YES NO _____

If renting, Does your lease allow pets? YES NO Is a deposit required? YES NO Is there a weight limit? YES NO

Is your landlord aware you intend to adopt an animal and have they given permission? YES NO

Landlord's name/phone number _____

Name and address of housing complex _____

Did you bring a copy of your lease? YES NO

Household information

Number of adults/their relationship to you _____ Number of/ages of children _____

Is this pet intended for your immediate family? YES NO Person primarily responsible for your new pet _____

Any history of allergies in your family? YES NO If so, what? _____

What is your family's current lifestyle: VERY ACTIVE ACTIVE MODERATE OFTEN HOME

Number of hours you work per day _____ Number of hours your pet will be left alone per day _____

Pet history (for pets your currently own, or have owned in the past five years)

Name of pet	Type/breed and sex	Kept where (i.e., indoor, outdoor)	Spayed/neutered?	Still own?	In no, what happened to the pet?

What inoculations has your current pet had in the last year? _____

Have you ever given a pet away or relinquished a pet to a shelter? YES NO

If yes, what were the circumstances? _____

Have any of your pets ever been (circle all that apply) LOST HIT BY A CAR PUT TO SLEEP GIVEN AWAY

If yes, what were the circumstances? _____

New pet information

Why do you want to adopt a dog? (Please check all that apply) Companion _____ Companion for another animal _____
Gift _____ To breed _____ For a child _____ To teach responsibility _____ Protection _____ Watch dog _____

How many times a day will you take your dog outdoors? _____ Will you take your dog to obedience class? YES NO
Where will the dog be kept when you are at home? INSIDE OUTSIDE GARAGE OTHER _____

Where will the dog be kept when you are not at home? _____

Do you plan on crating your dog? YES NO If so, when, why, and for how long? _____

Are you aware of the general pet care costs (food, inoculations, medical care, boarding, incidentals)? YES NO

Do you travel often with work or vacation? YES NO How often? WEEKLY MONTHLY YEARLY

Who will care for your dog in your absence? _____ What kind of ID will be kept on the dog? _____

How much time are you prepared to allow the dog to adjust to your home? _____

What will you do in the event of:
Barking problems _____ Aggressive behavior _____

Chewing/Digging _____ Housebreaking problems _____

In case of emergency, who will care for the dog _____

What veterinarian (or hospital) have you used or are going to use?

Name: _____ City: _____ Phone: _____

Name: _____ City: _____ Phone: _____

Are you aware of the **licensing regulations** and fees in your village? _____

Do you know the leash laws of your area? _____

Are you aware of the grooming costs for the breed that you are considering for adoption? _____

Please list 3 personal references along with phone numbers (neighbor, friend, relative):

1. _____ Phone _____ Relationship: _____

2. _____ Phone _____ Relationship: _____

3. _____ Phone _____ Relationship: _____

Almost Home:

How did you hear about Almost Home Foundation? _____

If it was a newspaper, which one? _____

Would you like information on becoming an Almost Home member? YES NO

Do you have any question or concerns? _____

I, the undersigned, certify that the information provided in this application is complete and accurate to the best of my knowledge. I understand that any misrepresentation of facts will result in my losing the privilege of adopting an animal from Almost Home Foundation. I realize that Almost Home Foundation has the right to deny my request to adopt an animal, either because the individual animal is not suitable to my circumstances, or on a more general basis. I understand that this application becomes the property of Almost Home Foundation, and all information given herein is for Almost Home Foundation's use alone. I, along with those persons accompanying me, assume risk of injury which may be incurred as a result of my viewing any animal under the care of Almost Home Foundation.

Signature: _____

Date: _____ / _____ / _____